

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Individuals Dedicated to Ethics and Science PAC

A.

Full Name (Last, First, Middle Initial)

Betty Sutton for Congress

Mailing Address 1700 W Market St
#155

City Akron State OH Zip Code 44313

Purpose of Disbursement
Contribution - Primary

Candidate Name

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 13

Transaction ID: D323168

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	0

Amount of Each Disbursement this Period

1000.00									
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B.

Full Name (Last, First, Middle Initial)

Schauer for Congress

Mailing Address PO Box 100

City Battle Creek State MI Zip Code 49016-0100

Purpose of Disbursement
Airfare purchase from United Airlines on credit card for 5/3 event for Schauer for CongressCandidate Name
Mark SchauerCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 07

Transaction ID: D323319

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	0

Amount of Each Disbursement this Period

354.20									
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[MEMO ITEM]**C.**

Full Name (Last, First, Middle Initial)

Chase Card Services (First Card)

Mailing Address PO Box 2004

City Elgin State IL Zip Code 60121-2004

Purpose of Disbursement
Staff travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D323169

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	0

Amount of Each Disbursement this Period

354.20									
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SUBTOTAL of Disbursements This Page (optional)**1354.20****TOTAL** This Period (last page this line number only)